

Work-Based Learning Attendance Record and Work Log

Instructions to Students: Use this log form to track your work attendance and to describe the work/duties you performed. The last page includes a space for the student and supervisor to sign. When complete, return the form to Internships@SCF.edu.

Student Info	rmation			
First Name			Last Name	
Job Title				
Employer In	formatio	n		
Business Name:				
Supervisor's Name	:			
Supervisor's Phone				Supervisor's Email
•				
Date	Time Arrived	Time Left	Total Hours Worked	Work Activity Description
	Time		Hours	
Date	Time Arrived	Left	Hours Worked	Work Activity Description
Date	Time Arrived	Left	Hours Worked	Work Activity Description
Date	Time Arrived	Left	Hours Worked	Work Activity Description
Date	Time Arrived	Left	Hours Worked	Work Activity Description
Date	Time Arrived	Left	Hours Worked	Work Activity Description
Date	Time Arrived	Left	Hours Worked	Work Activity Description
Date	Time Arrived	Left	Hours Worked	Work Activity Description
Date	Time Arrived	Left	Hours Worked	Work Activity Description

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First Name Last Name

Date Time Arrived Left Hours Work Activity Description
Worked Work Activity Description

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First Name	Last Name

Date	Time Arrived	Time Left	Total Hours Worked	Work Activity Description
TOTAL HOURS WORKED				Company in the Circumstance
Student's Signature:				Supervisor's Signature:
Date:				Date:

Once you have completed this form, send it to Internships@SCF.edu